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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* No, *g*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* No, *g*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MI	SHEETS DRAWING 1	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 3
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ADDRESS

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TITLE

Forming tool apparatus for hot stretch-forming processes

FILING FEE  RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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